	TION/CONT		OCKS 12, 17, 23, 24	1. & 30					1	2	
2. CONTRACT NO.	orr Entent, re-e		3. AWARD/ EFFECTIVE DATE	4. ORDER NUMBER				5. SOLICITATION NUMBER AG-4419-S-09	9-0012	6. SOLICITATION ISSUE DATE 07/10/2	
7. FOR SOLICITAL INFORMATION C		a. NAME JOANN I	OOUGHTY			6. TELEPHONE 404-347		(No collect calls)		DUE DATE/LOCAL TIME 3/2009 1700 E	
9. ISSUED BY				4419	10.01.07.000.000	QUISITION IS		100	0.0		
US FOREST SER	VICE				UN UN	RESTRICTED OR	X		00 % FOR:		
EROC EAST							X SMALL BUSINESS		BUSINESS SMALL		
1720 PEACHTREE ROAD NW ATLANTA GA 30309			NAICS: 11	15310		HUBZONE SMALL BUSINESS		Sole Source			
				SIZE STANI	DARD:		SERVICE-DISABLED VETERAN- 8(A)				
					\$17.5			OWNED SMALL BU			
DELIVERY FOR FOB DESTINA- TION UNLESS BLOCK IS 12. DISCOUNT TERMS				☐ 13a. THIS CONTRACT IS A RATED ORDER UNDER			13b. RATING				
MARKED SEE SCHEDULE						PAS (15 CFR 700)		14. METHOD OF SOLICITATION ☑RFQ ☐IFB ☐ RFP			
15. DELIVER TO		CODE	4419		16. ADMINIS	STERED BY			CODE 4	1419	
SEND QUOTES TO 1720 PEACHTRE SUITE 700 ATLANTA GA 30	E STREET	JACKSON		э	EROC :	REST SER EAST PEACHTRE TA GA 30	E ROA	D NW			
17a. CONTRACTOR/	CODE		FACILITY		18a. PAYME	ENT WILL BE MAD	DE BY		CODE		
OFFEROR			CODE		-				L		
· · · · · · · · · · · · · · · · · · ·		AND DUT OF OUR	ADDRESS IN SECTION		49h CUIDM	T INVOICES TO A	annesee s	ENOVANI IN DLOCK 189 LIND	II ESS BI OCK	BELOW.	
17b. CHECK IF REMITTAN	CE IS DIFFERENT	AND PUT SUCH				ECKED [SEE ADDI	Personal Control of the Control of t	ILESS BLOCK		
	CE IS DIFFERENT		ADDRESS IN OFFER 20. ILE OF SUPPLIES/SE	3			SEE ADDI		ILESS BLOCK	BELOW 24. AMOUNT	
17b. CHECK IF REMITTAN 19 ITEM NO. TAS:: WFM-0	12 1118:	schedu :TAS "RE	20. JLE OF SUPPLIES/SE ECOVERY" 10-1 WILDL	3	IS CH	21. QUANTITY	SEE ADDI	ENDUM 23.	ILESS BLOCK	24.	
19 ITAS:: WFM-0 HIAWA HAZAR OF EN	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN	SCHEDU :TAS "RI -687-091 ONAL FOR LLS TREAT G VEGATA	20. ULE OF SUPPLIES/SE ECOVERY" 10-1 WILDL REST: PMENT - (M ATION, DEL	RVICES	NAGEMEN EMOVAL UNDED B	21. QUANTITY	SEE ADDI	ENDUM 23.	ELESS BLOCK	24.	
19. ITAS:: WFM-0 HIAWA HAZAR OF EN THE A (ARRA	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN).	SCHEDU :TAS "RI -687-091 ONAL FOI LS TREAT G VEGATA RECOVERY	20. ULE OF SUPPLIES/SE ECOVERY" 10-1 WILDL REST: PMENT - (MATION, DEL	AND FIRE MA ECHANICAL F TA COUNTY) F VESTMENT AC	NAGEMEN EMOVAL UNDED B	21. QUANTITY	SEE ADDI	ENDUM 23.	ELESS BLOCK	24.	
19. ITAN O. TAS:: WFM-0 HIAWA HAZAR OF EN THE A (ARRA	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN).	SCHEDU :TAS "RF -687-091 ONAL FOR LLS TREAT G VEGATA RECOVERY	20. ULE OF SUPPLIES/SE ECOVERY" 10-1 WILDL REST: PMENT - (MATION, DEL	AND FIRE MA ECHANICAL F TA COUNTY) F	NAGEMEN EMOVAL UNDED B	21. QUANTITY	SEE ADDI 22. UNIT	ENDUM 23.		24. AMOUNT	
17b. CHECK IF REMITTAN 19 TAS:: WFM-0 HIAWA HAZAR OF EN THE A (ARRA	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN (Use Reverse PPROPRIATION CORPORATES	SCHEDU TAS "RE -687-091 CONAL FOR LLS TREAT G VEGATA RECOVERY and/or Attach	20. COVERY 10-1 WILDL REST: PMENT - (M ATION, DEL AND REIN Additional Shee	AND FIRE MA ECHANICAL F TA COUNTY) F VESTMENT AC Ms as Necessary)	NAGEMEN EMOVAL UNDED B T	21. QUANTITY T Y	SEE ADDI 22. UNIT	23. UNIT PRICE 6. TOTAL AWARD AM	OUNT (For G	24. AMOUNT Sovt. Use Only)	
□ 17b. CHECK IF REMITTAN 19 ITEM NO. TAS:: WFM-0 HIAWA HAZAR OF EN THE A (ARRA) 25. ACCOUNTING AND A 27a. SOLICITATION IN □ 27b. CONTRACT/PURC 28. CONTRACTOR IS F COPIES TO ISSUING G ALL ITEMS SET FORTI SHEETS SUBJECT TO	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN). (Use Reverse PPROPRIATION CORPORATES CHASE ORDER REQUIRED TO S SPFICE. CONTIL	SCHEDU: TAS "RE -687-091 ONAL FOR LS TREAT G VEGATA RECOVERY and/or Attact N DATA BY REFERENCE INCORPORATION GRACTOR AGRE ISE IDENTIFIEE IND CONDITION	20. JULE OF SUPPLIES/SE JULE OF SUPPLIES JULE OF SUPPLIES/SE JULE OF	AND FIRE MA ECHANICAL F TA COUNTY) F VESTMENT AC Its as Necessary) 2.212-4. FAR 52.212 E FAR 52.212-4. FAR URN 3 AND DELIVER ANY ADDITIONAL	NAGEMEN EMOVAL UNDED B T	Y 2-5 ARE ATTAC TTACHED. 29. AWARD DATED INCLUDING HEREIN, IS A	SEE ADDI	23. UNIT PRICE 6. TOTAL AWARD AM DDEND DA RACT REF.	OUNT (For G	24. AMOUNT GOVT. Use Only) ARE NOT ATTACH ARE NOT ATTACH ARE NOT ATTACH CICITATION (BLOCK 5), E SET FORTH	
TAS:: WFM-0 HIAWA HAZAR OF EN THE A (ARRA 25. ACCOUNTING AND A 27a. SOLICITATION IN 27b. CONTRACTIPURC 28. CONTRACTOR IS F COPIES TO ISSUING G ALL ITEMS SET FORTI	12 1118: 900-1HFR THA NATI DOUS FUE CROACHIN MERICAN). (Use Reverse PPROPRIATION CORPORATES CHASE ORDER REQUIRED TO S SPFICE. CONTIL	SCHEDU: TAS "RE -687-091 ONAL FOR LS TREAT G VEGATA RECOVERY and/or Attact N DATA BY REFERENCE INCORPORATION GRACTOR AGRE ISE IDENTIFIEE IND CONDITION	20. JULE OF SUPPLIES/SE JULE OF SUPPLIES JULE	AND FIRE MA ECHANICAL F TA COUNTY) F VESTMENT AC Its as Necessary) 2.212-4. FAR 52.212 E FAR 52.212-4. FAR URN 3 AND DELIVER ANY ADDITIONAL	NAGEMEN EMOVAL UNDED B T 3 AND 52.212 52.212-5 IS A	Y 2-5 ARE ATTAC TTACHED. 29. AWARD DATED INCLUDING HEREIN, IS A	SEE ADDI 22. UNIT ADDEN OF CONT ANY ADD ACCEPTERA (A	23. UNIT PRICE 16. TOTAL AWARD AM DDEND DA RACT REF. YOUR OF ITIONS OR CHANGES D AS TO ITEMS:	OUNT (For G	24. AMOUNT GOVT. Use Only) ARE NOT ATTACH ARE NOT ATTACH ARE NOT ATTACH CICITATION (BLOCK 5), E SET FORTH	

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19. ITEM NO.		20. SCHEDULE OF SUPPLIE	S/SERVICES		21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT	
		st 187 acres of ve					3		
		tion to within 12							
		in pieces less tha		ngth					
	and as spec	cified in the scor	be of work.						
		POINT OF CONTACT:	KIRK PIEHLER		-				
	(906) 789-3	3/4			-				
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	TY IN COLUMN 21 HA	ACC	EPTED, AND CONFORMS TO	THE CONTR	ACT, EXCE	PT AS			
RECEI		SPECTED NOT		22d BBI	NITED NAME	AND	TITLE OF AUTHORIZED O	GOVERNMENT REPRESENTATIVE	
32b. SIGNATI	URE OF AUTHORIZED	GOVERNMENT REPRESENTATI	VE 32C DATE	320. PK	INTED NAME	AND	TITLE OF AUTHORIZED O	OVERNMENT REPREDENTATIVE	
32e. MAILING	ADDRESS OF AUTHO	DRIZED GOVERNMENT REPRESE	ENTATIVE	32f, TEL	EPHONE NU	IMBER	OF AUTHORIZED GOVE	RNMENT REPRESENTATIVE	
				32g. E-N	IAIL OF AUT	HORIZ	ZED GOVERNMENT REPR	ESENTATIVE	
33. SHIP NUMBER 34, VOUCHER NUMBER 35.		35. AMOUNT VERIFIED	AMOUNT VERIFIED 36. PAY				37. CHECK NUMBER		
	CORF		CORRECT FOR			_	DADTIN DENIN		
PARTIA	L FINAL		<u> </u>		MPLETE		PARTIAL FINAL		
38. S/R ACCC	DUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY						
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT 41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER 41c. DATE					42a. RECEIVED BY (Print)				
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER 41c. DATE			42b.	42b. RECEIVED AT (Location)					
				42c. [ATE REC'D	(YY/M	(M/DD) 42d. TOT	AL CONTAINERS	
								STANDARD FORM 1449 (REV. 3/2005) BAC	